



**HAWAII STATE ETHICS COMMISSION**  
1001 BISHOP STREET, ASB TOWER 970  
P.O. BOX 616, HONOLULU, HAWAII 96809  
TEL: 587-0460 FAX: 587-0470  
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STATE OF HAWAII  
STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

<b>PART I LOBBYIST</b>			
NAME(Last)	(First)	(Middle)	TELEPHONE
<b>Keolanui</b>	<b>Cynthia</b>	<b>Louise</b>	<b>946-2187 ext. 222</b>
MAILING ADDRESS (Street)			FAX
<b>2700 Waialae Avenue</b>			<b>955-6034</b>
(City)	(State)	(Zip Code)	
<b>Honolulu</b>	<b>Hawaii</b>	<b>96826</b>	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
<b>Hawaiian Humane Society</b>			<b>946-2187</b>
MAILING ADDRESS (Street)			FAX
<b>2700 Waialae Avenue</b>			<b>955-6034</b>
(City)	(State)	(Zip Code)	
<b>Honolulu</b>	<b>Hawaii</b>	<b>96826</b>	

<b>PART II ORGANIZATION</b>		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
<b>Hawaiian Humane Society</b>		<b>946-2187</b>
MAILING ADDRESS (Street)		FAX
<b>2700 Waialae Avenue</b>		<b>955-6034</b>
(City)	(State)	(Zip Code)
<b>Honolulu</b>	<b>Hawaii</b>	<b>96826</b>
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
<b>Felix Young</b>		<b>946-2187 ext. 201</b>
MAILING ADDRESS (Street)		FAX
<b>2700 Waialae Avenue</b>		<b>955-6034</b>
(City)	(State)	(Zip Code)
<b>Honolulu</b>	<b>Hawaii</b>	<b>96826</b>

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

<input checked="" type="checkbox"/> Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	<input checked="" type="checkbox"/> Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	<u>Animal related</u> <u>issues</u>

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Cynthia L. Solomon  
(Signature of Lobbyist)

January 28, 2005

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
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**Pamela Burns**

**President and CEO**

NAME OF ORGANIZATION (if applicable)

**Hawaiian Humane Society**

TELEPHONE

**946-2187 ext. 202**

MAILING ADDRESS (Street)

**2700 Waialae Avenue**

FAX

**955-6034**

(City)

**Honolulu**

(State)

**Hawaii**

(Zip Code)

**96826**

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

Pamela Burns  
(Signature of Authorizing Officer or Person Represented)

January 28, 2005

(Date)